Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	art 1: Identify Yourself					
		About Debtor 1:	4	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Chaunston First name  O'Brien  Middle name		First name  Middle name		
	Bring your picture identification to your meeting with the trustee.	Jordan Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years Include your married or maiden names.	CJ Jordan Chuck O'Brien Jordan				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5949				

Debtor 1 Chaunston O'Brien Jordan

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)			
	doing business as names	EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
J.	where you live	455 Loblolly Circle Louisburg, NC 27549	ii Debtoi 2 lives at a unicient address.			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Franklin County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing     this district to file for		Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 **Chaunston O'Brien Jordan** Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District Case number District When 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

No. Go to line 12.

bankruptcy petition.

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Deb	otor 1 Chaunston O'Brie	n Jordar	1	Case number (if known)			
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propr	ietor			
12.	Are you a sole proprietor						
	of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of b	usiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if ar	ny			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, S	tate & ZIP Code			
	it to this petition.		Check the appropriate	Check the appropriate box to describe your business:			
			☐ Health Care But	siness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Re	eal Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as	s defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abo	ove			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set an addines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stated that you statement, and federal income tax return or if any of these documents do not exist, follow the 1 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Ch	apter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapt Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed'	?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	- ·			Number, Street, City, State & Zip Code			

Debtor 1 Chaunston O'Brien Jordan

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Chaunston O'Brie	n Jordan		Case numbe	r (if known)		
Par	t 6: Answer These Questi	ions for Re	porting Purposes				
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			■ Yes. Go to line 17.				
				usiness debts? Business debts are debts estment or through the operation of the busi			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	owe that are not consumer debts or busines	s debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any exempt propyrailable to distribute to unsecured creditors?	erty is excluded and administrative expenses		
	administrative expenses		□ No				
	are paid that funds will be available for		☐ Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	<b>5</b> 0,001-100,000		
		100-19		□ 10,001-25,000	☐ More than100,000		
		200-99	9				
19.	How much do you	<b>\$0 - \$5</b>	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			01 - \$500,000 01 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>—</b> \$500,0					
20.	How much do you estimate your liabilities	<b>■</b> \$0 - \$5	60,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion		
<b>D</b>	O'm Dalam	<b>—</b> \$000,0					
Par -							
For	you	I have exa	amined this petition, and I de	clare under penalty of perjury that the inforn	nation provided is true and correct.		
				7, I am aware that I may proceed, if eligible, relief available under each chapter, and I ch			
If no attorney represents me and I did not pay or agree to pay someone document, I have obtained and read the notice required by 11 U.S.C. §					t an attorney to help me fill out this		
		I request	relief in accordance with the	chapter of title 11, United States Code, spec	cified in this petition.		
		bankrupto and 3571.	y case can result in fines up	, concealing property, or obtaining money o to \$250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			nston O'Brien Jordan on O'Brien Jordan	Signature of Debto	72		
			of Debtor 1	Oignature of Debitor	· <del>-</del>		
		Executed	on February 5, 2018	Executed on			
			MM / DD / YYYY		/ DD / YYYY		

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Debtor 1 Chaunston O'Brien Jordan Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jason Watson for LOJTO	Date	February 5, 2018
Signature of Attorney for Debtor	_	MM / DD / YYYY
1		
Jason Watson for LOJTO 32986		
Printed name		
The Law Offices of John T. Orcutt, PC		
Firm name		
6616-203 Six Forks Road		
Raleigh, NC 27615		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
32986		
Bar number & State		

Fill in th	nis informa	ation to identify you	case:			
Debtor	1	Chaunston O'Br	ien Jordan			
<b>.</b>	•	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if		First Name	Middle Name	Last Name		
United S	States Bank	cruptcy Court for the:	EASTERN DISTRICT OF EXEMPTIONS)	NORTH CAROLINA (NC		
Case nu	umber					
(if known)					_	Check if this is an
						mended filing
Offici	ial Ear	m 107				
	ial For	-	Affairs for Individ	luals Filing for B	ankruntov	A144
					equally responsible for sup	4/16
informat	tion. If mo	•	attach a separate sheet to	<b>5 5</b> <i>7</i>	y additional pages, write you	. , .
Part 1:	Give De	tails About Your Ma	rital Status and Where You	Lived Before		
1. Wh	at is your	current marital statu	s?			
П	Married					
	Not marri	ed				
2 D	ring the les	ot 2 voore have vou	lived anywhere other than y	where you live new?		
2. Dui	ing the las	st 3 years, nave you	lived anywhere other than t	where you live now?		
	No					
	Yes. List	all of the places you I	ived in the last 3 years. Do no	t include where you live now	I.	
De	btor 1 Pric	or Address:	Dates Debtor 1	Debtor 2 Prior Ac	ldress:	Dates Debtor 2
			lived there			lived there
					ity property state or territory ico, Texas, Washington and W	
_			.,,,	,	3.1 S. 1.1 S. 1.	,
-	No Voc Mak	a aura vau fill aut Cal	andula III Vaur Cadabtara (Of	finial Form 40CLI)		
	res. Mak	e sure you fill out Scr	nedule H: Your Codebtors (Of	iiciai Form 106H).		
Part 2	Explain	the Sources of You	r Income			
4. Did	vou have	any income from en	nplovment or from operatin	g a business during this ve	ear or the two previous cale	ndar vears?
Fill	in the total	amount of income yo	u received from all jobs and a have income that you receive	ill businesses, including part	-time activities.	ruur youro.
	No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,600.59	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 <u>C</u>	haunston (	O'Brien Jo	rdan	Ca	ase number (if known) _	
			Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of incor Check all that app	
For last cale (January 1 to		31, 2017 )	■ Wages, commissions, bonuses, tips	\$35,427.70	☐ Wages, commi	issions,
			☐ Operating a business		☐ Operating a bu	siness
For the caler (January 1 to	•		■ Wages, commissions, bonuses, tips	\$37,901.57	☐ Wages, common bonuses, tips	issions,
			☐ Operating a business		☐ Operating a bu	siness
■ No	source and t		Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incor Describe below.	Gross income (before deductions and exclusions)
Part 3: Lis	t Certain Pa	vments You	ı Made Before You Filed for ∣	,		
6. Are eithe □ No.	Neither Deindividual puring the No.	ebtor 1 nor lorimarily for a 90 days bef Go to line List below paid that continued	a personal, family, or househol ore you filed for bankruptcy, di 7. each creditor to whom you pai	Imer debts. Consumer dead purpose."  d you pay any creditor a to d a total of \$6,425* or more ats for domestic support ob his bankruptcy case.	tal of \$6,425* or more e in one or more paym ligations, such as child	ents and the total amount you I support and alimony. Also, do
■ Yes			or both have primarily consu ore you filed for bankruptcy, di		tal of \$600 or more?	
	□ No. ■ Yes	include pa	each creditor to whom you pai			u paid that creditor. Do not so, do not include payments to a
Creditor	's Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this payment for

Paid ordinary payments, in part, on bills and loans.  \$0.00 \$0.00   Mortgage   Car   Credit Card   Loan Repayment   Suppliers or vendors   Other_	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
			\$0.00	\$0.00	☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors

7.	Within 1 year before you filed for bankruptc <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	tners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	erships of which yo g securities; and a	ou are a gener ny managing a	al partner; corporations agent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosig		ments or transfer a	ny property on a	ccount of a d	lebt that benefited an
	<ul><li>No</li><li>☐ Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
D	Libertife Level Actions Democratic		para	Juli Ou C	morado orda	and a name
Par	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
Э.	Within 1 year before you filed for bankruptc List all such matters, including personal injury of modifications, and contract disputes.  No Yes. Fill in the details.	ases, small claims actions	, divorces, collectio		actions, suppo	rt or custody
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address		rty repossessed, f		shed, attache	d, seized, or levied?  Value of the
	Creditor Name and Address	Describe the Property		Date		property
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.			nancial institution	n, set off any	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an □ No □ Yes		rty in the possessi			efit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No	cy, did you give any gifts	with a total value	of more than \$60	00 per person	?
	☐ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Chaunston O'Brien Jordan

14.	Within 2 years before you filed for bankru	ıptcy, d	lid you give any gifts or contribution	s with a total	value of more than	\$600 to any charity?		
	■ No							
	Yes. Fill in the details for each gift or co				<b>5</b> .			
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value		
Dar	t 6: List Certain Losses							
rai	List Certain Losses							
15.	Within 1 year before you filed for bankrup or gambling?	otcy or	since you filed for bankruptcy, did yo	ou lose anytl	ning because of thef	t, fire, other disaster		
	■ No							
	☐ Yes. Fill in the details.							
	Describe the property you lost and	Descril	be any insurance coverage for the lo	SS	Date of your	Value of property		
			the amount that insurance has paid. Lice claims on line 33 of Schedule A/B: H		loss	lost		
Por	t 7: List Certain Payments or Transfers							
rai	List Certain Fayinents of Transiers							
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p	reparin	g a bankruptcy petition?			rty to anyone you		
	□ No							
	Yes. Fill in the details.							
			Barada da andre da antre da a		D-1	A		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	DECAF		Credit Counseling		1/2018	\$15.00		
	112 Goliad Street Benbrook, TX 76126-2009		<b>9</b>			<b>V</b>		
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred				r transfer any prope	rty to anyone who		
	Do not include any payment or transfer that							
	No							
	Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment		
40	Middin O		Palarana and Amaria and Amaria and Amaria	<b>.</b>		. (1		
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alrest No	r <b>busin</b> made a	ess or financial affairs? as security (such as the granting of a se					
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address		Description and value of property transferred		ny property or received or debts	Date transfer was made		
	Person's relationship to you			para ili oxe				

Debtor 1 Chaunston O'Brien Jordan

	<ul><li>beneficiary? (These are often called asset-p</li><li>No</li><li>Yes. Fill in the details.</li></ul>	,				
	Name of trust	Description and	value of the pro	operty tran	sferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, I	nstruments. Safe Depos	sit Boxes, and S	torage Uni	ts	
	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asset No	cy, were any financial a	accounts or inst	ruments he	eld in your name, or fo	
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	State Employees' Credit Union Attn: Officer Post Office Box 25279 Raleigh, NC 27611	XXXX-	☐ Checking ☐ Savings ☐ Money Ma ☐ Brokerage	)	1/2018	\$25.00
			Other Ch	ecking		
<b>.</b> 4	De very period being an did very house within 1	year hafara yayı filad f	and Saving Accounts			
21.	Do you now have, or did you have within 1 cash, or other valuables?  No Yes. Fill in the details.	year before you filed fo	and Saving Accounts		posit box or other dep	ository for securities,
21.	cash, or other valuables?  No	year before you filed for the second of the	and Saving Accounts or bankruptcy, a	any safe de	posit box or other dep	ository for securities,  Do you still have it?
21.	cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit	Who else had at Address (Number, State and ZIP Code)	and Saving Accounts  or bankruptcy, a  ccess to it? , Street, City,	any safe de Describe	the contents	Do you still have it?
21.	cash, or other valuables?  ■ No □ Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)	Who else had at Address (Number, State and ZIP Code)	and Saving Accounts  or bankruptcy, a  ccess to it? , Street, City,	any safe de Describe	the contents	Do you still have it?
21.	cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit	Who else had at Address (Number, State and ZIP Code)	and Saving Accounts  or bankruptcy, a  ccess to it? Street, City,  ur home within a	Describe	the contents	Do you still have it?
	cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit No Yes. Fill in the details.  Name of Storage Facility	Who else had ac Address (Number, State and ZIP Code)  or place other than you  Who else has or to it? Address (Number, State and ZIP Code)	and Saving Accounts  or bankruptcy, a  ccess to it? Street, City,  ur home within a	Describe	the contents re you filed for bankru	Do you still have it? ptcy?  Do you still
Pa	Cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)  or place other than you  Who else has or to it? Address (Number, State and ZIP Code)	and Saving Accounts  or bankruptcy, a  ccess to it? , Street, City,  ur home within a  r had access , Street, City,	Describe 1 year befo	the contents re you filed for bankru the contents	Do you still have it? ptcy?  Do you still have it?
Pa	Cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  rt 9: Identify Property You Hold or Control Do you hold or control any property that s	Who else had ac Address (Number, State and ZIP Code)  or place other than you  Who else has or to it? Address (Number, State and ZIP Code)	and Saving Accounts  or bankruptcy, a  ccess to it? , Street, City,  ur home within a  r had access , Street, City,	Describe 1 year befo	the contents re you filed for bankru the contents	Do you still have it? ptcy?  Do you still have it?

Debtor 1 Chaunston O'Brien Jordan

Debtor 1 Chaunston O'Brien Jordan

Part 10: Give Details About Environmental Information

Case number (if known)

For	the purpose of Part 10, the following definitions	apply:						
•	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	substance,				
Rep	port all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.					
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details. Name of site	Governmental unit	Environmental law if you	Date of notice				
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of Hotice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	rt 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	ny of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a t	•						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execut	ive of a corporation						
	☐ An owner of at least 5% of the voting or	equity securities of a corporation						
	■ No. None of the above applies. Go to Part	12.						
	Yes. Check all that apply above and fill in the details below for each business.							

Official Form 107

**Business Name** 

(Number, Street, City, State and ZIP Code)

Address

Describe the nature of the business

Name of accountant or bookkeeper

**Employer Identification number** 

Dates business existed

Do not include Social Security number or ITIN.

Debtor 1	Chaunston	O'Brien	.lordan
	Cilauliston		JUIUAII

28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.				
	■ No □ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			

Official Form 107

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Debtor	Chaunston O'Brien Jordan	Case number (if known)	
Part 12	Sign Below		
are true	and correct. I understand that makin	inancial Affairs and any attachments, and I declare under penalty of perjury that the answard false statement, concealing property, or obtaining money or property by fraud in connect \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Cha	unston O'Brien Jordan		
	ston O'Brien Jordan ire of Debtor 1	Signature of Debtor 2	
Date	February 5, 2018	Date	
Did you	attach additional pages to Your State	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No			
☐ Yes			
Did you	pay or agree to pay someone who is	ot an attorney to help you fill out bankruptcy forms?	
■ No			
☐ Yes. I	Name of Person Attach the Bar	uptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

						Ŭ	
Fill in this infor	mation to identify your	case an	d this filing:				
Debtor 1	Chaunston O'Bri		lan 1iddle Name	Last Name			
Dobtor O	Filst Name	IV	liquie ivame	Last Name			
Debtor 2 Spouse, if filing)	First Name	M	liddle Name	Last Name			
(,9)							
United States Ba	ankruptcy Court for the:		RN DISTRICT OF PTIONS)	NORTH CAROLINA (NC			
Casa numbar						_	
Case number _							Check if this is ar amended filing
			-				ag
Official Fo	orm 106A/B						
		orty.	,				40/45
Scriedui	<u>le A/B: Prop</u>	<b>Jerty</b>					12/15
nformation. If mor answer every ques	re space is needed, attach stion.	n a separat	te sheet to this forn	d people are filing together, both and the top of any additional page  You Own or Have an Interest In			•
Describe	Lacii Nesidelice, Dullalli	y, Lanu, O	. Julei Neai Estate	TOU OWN OF FIAVE AN INTEREST IN			
. Do you own or l	have any legal or equitab	le interest	in any residence, b	ouilding, land, or similar property?			
No. Go to Par	rt 2.						
☐ Yes. Where i	is the property?						
Part 2: Describe	Your Vehicles						
□ No ■ Yes							
3.1 Make:	Dodge		Who has an intere	est in the property? Check one	Do not deduct secure		
Model:	Charger		■ Debtor 1 only		the amount of any se Creditors Who Have		
_	2006		_ ′				, , ,
Approximat		3,000	Debtor 2 only	lahtar 2 anlı	Current value of the entire property?	-	urrent value of the ortion you own?
Other infor	-	,000	Debtor 1 and D		entire property?	pc	ortion you own:
			☐ At least one of t	the debtors and another			
xxxx-xx-	Auto Insurance: Poli 58-65	Cy #	Check if this is (see instructions)	s community property	\$4,440.0	<u> </u>	\$4,440.00
Examples: Boa  No Yes  Add the dolla pages you ha	ats, trailers, motors, pers	onal wate you own . Write th	ercraft, fishing vess for all of your en nat number here	al vehicles, other vehicles, and sels, snowmobiles, motorcycle activities from Part 2, including any efollowing items?	y entries for		\$4,440.00
						Do n	ion you own? not deduct secured ns or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	Chaunston C	D'Brien Jordan	Case number	(if known)
6.		old goods and fo es: Major applian	urnishings ces, furniture, linens, china, kitcher	nware	
	Yes.	Describe			
			Household Goods		\$605.00
7.	□ No	es: Televisions ar	nd radios; audio, video, stereo, and phones, cameras, media players, ç	digital equipment; computers, printers, scanners games	s; music collections; electronic devices
			Television		\$100.00
8.	Example  No		figurines; paintings, prints, or other	artwork; books, pictures, or other art objects; sta	amp, coin, or baseball card collections;
9.	Example No	ent for sports ar es: Sports, photo musical instru	graphic, exercise, and other hobby	equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
10	■ No		s, shotguns, ammunition, and relate	d equipment	
11	□ No		othes, furs, leather coats, designer	wear, shoes, accessories	
			Clothing and Personal		\$200.00
12	■ No		welry, costume jewelry, engagemer	nt rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
13	Examp ■ No	rm animals  bles: Dogs, cats, b	pirds, horses		
14	□ No	her personal and		ready list, including any health aids you did r	oot list
				Claim(s). ement/award by Bankruptcy Court. no specific claims are known at	\$0.00

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1	Chaunston O'Brien Jordan	Case number (if known)	
	the dollar value of all of your entries from F art 3. Write that number here	Part 3, including any entries for pages you have attached	\$905.00
Part 4: De	escribe Your Financial Assets		
Do you o	wn or have any legal or equitable interest ir	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		ome, in a safe deposit box, and on hand when you file your petitio	'n
Yes.			
		Cash	\$200.00
Exam	sits of money  sples: Checking, savings, or other financial acc  institutions. If you have multiple account	ounts; certificates of deposit; shares in credit unions, brokerage h s with the same institution, list each. Institution name:	ouses, and other similar
	Observation	First Citizana Bank	¢500.00
	17.1. Checking	First Citizens Bank	\$500.00
joint v ■ No	venture	orated and unincorporated businesses, including an interest	in an LLC, partnership, and
☐ Yes.	Give specific information about them	% of ownership:	
Nego		otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	Give specific information about them Issuer name:		
	ment or pension accounts  ples: Interests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing p	olans
■ Yes.	List each account separately.  Type of account:	Institution name:	
	401(k)	401 (k) (Value: \$21,000.00)	\$0.00
Your s Exam		o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compani	ies, or others
■ No □ Yes.		Institution name or individual:	
23. <b>Annui</b>		ey to you, either for life or for a number of years)	
■ No	Issuer name and description.		
⊔ Yes. Official For		Schedule A/B: Property	page
			r~90 \

De	ebtor 1	Chaunsto	n O'Brien Jordan		Case number	r (if known)	
24.			ation IRA, in an account 1), 529A(b), and 529(b)(1)		m, or under a qualified state t	tuition program.	
	☐ Yes		Institution name and des	cription. Separately file the re	cords of any interests.11 U.S.C	C. § 521(c):	
25.	Trusts, ■ No	equitable or	future interests in prop	erty (other than anything lis	sted in line 1), and rights or p	owers exercisable for your benefit	
	☐ Yes.	Give specific	information about them				
26.				ets, and other intellectual p proceeds from royalties and li			
	☐ Yes.	Give specific	information about them				
			es, and other general inta permits, exclusive licenses		ldings, liquor licenses, profession	onal licenses	
		Give specific	information about them				
Mo	oney or p	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.	
28.	Tax refu ■ No	unds owed to	o you				
	☐ Yes. 0	Give specific i	information about them, in	ncluding whether you already	filed the returns and the tax yea	ars	
	■ No	les: Past due	or lump sum alimony, spo	ousal support, child support, n	naintenance, divorce settlemen	nt, property settlement	
	<b>—</b> 103. (	Sive specific i	miorination				
30.	Examp	<i>les:</i> Unpaid w	neone owes you /ages, disability insurance unpaid loans you made to		, sick pay, vacation pay, worke	ers' compensation, Social Security	
	■ No □ Yes.	Give specific	information				
31.	_Examp	t <b>s in insuran</b> d les: Health, di		health savings account (HSA	.); credit, homeowner's, or rente	er's insurance	
	■ No □ Yes. N	Name the insu	urance company of each բ	policy and list its value.			
			Company name:		Beneficiary:	Surrender or refund value:	
32.	If you a			n someone who has died ect proceeds from a life insura	nce policy, or are currently enti	itled to receive property because	
	■ No □ Yes.	Give specific	information				
				Clade Januari			
33.	_Examp			nsurance claims, or rights to s	made a demand for payment sue		
	■ No □ Yes.	Describe eac	ch claim				
34.	Other c	ontingent an	nd unliquidated claims o	f every nature, including co	ounterclaims of the debtor and	d rights to set off claims	
	■ No □ Yes	Describe eac	ch claim				
		_ 5551105 646					

Official Form 106A/B Schedule A/B: Property page 4

Deb	tor 1	Chaunston O'Brien Jordan		Case number (if known)	
35. <b>/</b>	Any fir	nancial assets you did not already list			
	No				
	Yes.	Give specific information			
36.		the dollar value of all of your entries from Part 4, includitant 4. Write that number here			\$700.00
	101 1 6	art 4. Write that humber here			
Part	5: De	scribe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
07 <b>D</b>			4-1		
_	-	own or have any legal or equitable interest in any business-rela o to Part 6.	ited property?		
		Go to line 38.			
ч	res. C	50 to line 38.			
	_				
Part		scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
	пу	ou own or have an interest in familiand, list it in Fait 1.			
46. <b>[</b>	ο γοι	ı own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes	. Go to line 47.			
		_			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
53. <b>C</b>	ο νοι	ı have other property of any kind you did not already lis	t?		
		oles: Season tickets, country club membership			
	] No				
	Yes.	Give specific information			
		.IMPORTANT NOTICES:			
		(1) Valuation Method (Sch. A &	B): FMV unless oth	nerwise noted.	
		(2) Creditor claims disclosed o	un Sch D E & E ara	estimates only	
		drawn largely from unverified i			
		and shall not be considered an	admission by the	Debtor(s) of the	
		amount owed, interest, late fe or representatives an admission			
		actual owners of such claims.	on by the Debtor(s)	that such parties are	\$0.00
				Г	
54.	Add t	he dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
				_	
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	l: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$4,440.00		
57.	Part 3	3: Total personal and household items, line 15	\$905.00		
58.	Part 4	4: Total financial assets, line 36	\$700.00		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+ \$0.00		
62.	Total	personal property. Add lines 56 through 61	\$6,045.00	Copy personal property to	stal <b>\$6,045.00</b>
JŁ.	· otal	paration property rad miles so though of	ψυ,υ4υ.υυ	-	φυ,υτυ.υυ
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$6,045.00

Official Form 106A/B Schedule A/B: Property page 5

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Rev. 3/2016

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)

IN THE MATTER OF: Chaunston O'Brien Jordan Debtor(s). CASE NUMBER:

#### SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

լ, <u>Chaunston O'Brien Jordan</u>	, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of
North Carolina, and nonbankruptcy Federal law:	(Attach additional sheets if necessary).

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage <u>or Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
-NONE-						
Debtor's Age: Name of former co-owner	er:					

# VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 0.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	
2006 Dodge Charger 143,000 miles GEICO Auto Insurance: Policy # xxxx-xx-58-65	4,440.00		State Employees' Credit Union	4,810.00	0.00	0.00

### VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is **0**.

Description of Property	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Clothing and Personal	200.00				200.00	200.00
Household Goods	605.00				605.00	605.00
Television	100.00				100.00	100.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 905.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONF-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description
-NONE-

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity

-NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
Cash	200.00				200.00	200.00
Checking: First	500.00				500.00	500.00
Citizens Bank						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$

700.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

401(k): 401 (k) (Value: \$21,000.00)

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number

-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds

-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

-NONE-	
15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA	
-NONE-	
16. FEDERAL PENSION FUND EXEMPTIONS	
-NONE-	
17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW	
-NONE-	1

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market	Lien	Amount	Net
	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

Claimant	Nature of Claim	Amount of Claim	Description of Property	Value of Property	Net <u>Value</u>
-NONE-	<u>Olami</u>	<u>Olaiiii</u>	Toporty	<u>or rioperty</u>	<u>value</u>

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

# UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

	I, _	Chaunston O'Brien Jordan	, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as
Exempt	, cons	isting of 4 sheets, and that they are tru	ue and correct to the best of my knowledge, information and belief.

Executed on:	February 5, 2018	/s/ Chaunston O'Brien Jordan
		Chaunston O'Brien Jordan
		Debtor

Fill in this informati	ion to identify you	r case:			
Debtor 1	Chaunston O'Br	ien Jordan			
	First Name	Middle Name Last Name			
Debtor 2	Circl Name	Middle News			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankru	uptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA EXEMPTIONS)	A (NC		
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
Official Form 1	OCD				
Official Form 1					
Schedule D	: Creditors	Who Have Claims Secured	l by Property	'	12/15
		f two married people are filing together, both are equut, number the entries, and attach it to this form. Or			
1. Do any creditors hav	e claims secured by	your property?			
□ No. Check this	s box and submit th	is form to the court with your other schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in all	of the information b	pelow.			
Part 1: List All Se	ecured Claims				
		nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in Part 2. As all order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
State Employ	yees' Credit		\$4,940,00	\$4.440.00	\$270.00
Union Creditor's Name		Describe the property that secures the claim:	\$4,810.00	\$4,440.00	\$370.00
Oreditor 3 Name		2006 Dodge Charger 143,000 miles GEICO Auto Insurance: Policy #			
Attn: Officer		xxxx-xx-58-65			
Post Office E		As of the date you file, the claim is: Check all that			
Raleigh, NC		apply.  Contingent			
Number, Street, City	, State & Zip Code	☐ Unliquidated			
	•	☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the d		☐ Judgment lien from a lawsuit			
Check if this claim community debt		•	loney Security Inte	rest	
Date debt was incurre	d 2014	Last 4 digits of account number			
Add the dollar value	of your entries in Co	olumn A on this page. Write that number here:	\$4,810	0.00	
If this is the last pag	e of your form, add t	he dollar value totals from all pages.	\$4,810		
Write that number he	ere:		Ψ-1,010		
Part 2: List Others	to Be Notified for	a Debt That You Already Listed			

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Ousc 10	COCCO C DIVIVI	D00 1	1 1100 02/0	,0,10 L	iterea e	12/00/10 14.0	71.00 Tage	20 01 04
Fil	I in this inform	ation to identify your	case:						
De	ebtor 1	Chaunston O'Brie	en Jordan						
		First Name	Middle	Name	Last Nam	е			
1 -	ebtor 2								
(Sp	ouse if, filing)	First Name	Middle	Name	Last Nam	е			
Ur	nited States Ban	kruptcy Court for the:	EASTERN EXEMPTION	N DISTRICT OF N ONS)	ORTH CAR	DLINA (NC			
Ca	ase number								
	known)			<u> </u>				☐ Check	if this is an
								amend	ed filing
$\sim$	::::::::::::::::::::::::::::::::::::::	400E/E							
	ficial Form								4044
Sc	chedule E	F: Creditors W	ho Have	e Unsecure	ed Claim	<u>s</u>			12/15
Sch left.	edule D: Credito	ory Contracts and Unexpors Who Have Claims Sectionation Page to this pag ber (if known).	ured by Prop	erty. If more space	is needed, co	py the Part	you need, fill it out,	number the entries in	n the boxes on the
Pa	rt 1: List All	of Your PRIORITY Un	secured Cla	aims					
1.	Do any creditor	rs have priority unsecure	d claims agai	inst you?					
	☐ No. Go to Pa	art 2.							
	Yes.								
2.	identify what typ possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pa	as both priority er according to	and nonpriority amount the creditor's name	ounts, list that one. If you have m	claim here an	d show both priority a	and nonpriority amount	ts. As much as
	(For an explana	tion of each type of claim, s	see the instruc	ctions for this form in	the instruction	booklet.)			
							Total claim	Priority amount	Nonpriority amount
2.1	Law Offi	ice of John T Orcutt	ŧ	Last 4 digits of acc	count number		\$4,950.00	\$4,950.00	\$0.00
		ditor's Name	•				Ψ-1,000.00	Ψ+,000.00	Ψοίου
		Forks Road		When was the deb	t incurred?	1/2018		_	
	Suite 20	-							
		NC 27615 reet City State Zlp Code		As of the date you	file, the claim	is: Check al	I that apply		
		the debt? Check one.		☐ Contingent	,				
	Debtor 1 or	nlv		☐ Unliquidated					
	_	,							
	☐ Debtor 2 or			Disputed  Type of PRIORITY					
		nd Debtor 2 only				airri:			
	☐ At least one	e of the debtors and anothe	<b>,</b>	☐ Domestic suppo	· ·				
		nis claim is for a commur	my aost	Taxes and certa	-				
	_	ubject to offset?		Claims for death					
	■ No			Other. Specify			enses		
	☐ Yes				<b>Attorney F</b>	ees			

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Debt	tor 1 Chaunston O'Brien Jordan		Case nur	mber (if know)		
2.2	Law Office of John T Orcutt  Priority Creditor's Name 6616 Six Forks Road Suite 203	Last 4 digits of account number When was the debt incurred?	1/2018	\$335.00	\$335.00	\$0.00
	Raleigh, NC 27615  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all th	at apply		
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim·			
	At least one of the debtors and another	Domestic support obligations				
	_	☐ Taxes and certain other debts	vou owe the ao	/ernment		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Claims for death or personal in				
	No	Other Specify Administra	ative Expen	ses		
	☐ Yes		ees/Advan			
4. L u tł	No. You have nothing to report in this part. Submit Yes.  List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2.	alphabetical order of the creditor laim. For each claim listed, identify w	who holds eac hat type of claim	n it is. Do not list claims a	already included in Par	t 1. If more n Page of
4.1	.IMPORTANT NOTICE:	Last 4 digits of account numl	ner.		10141	\$0.00
	Nonpriority Creditor's Name See notice re: creditor claims set forth on Schedule A Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the cla		I that apply		Ψ0.00
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a seport as priority claims	separation agree	ement or divorce that you	u did not	
	■ No	☐ Debts to pension or profit-sh	naring plans, and	d other similar debts		
	Yes	Other. Specify				

Debtor 1 Chaunston O'Brien Jordan		Case number (if know)				
4.2	Ally Financial	Last 4 digits of account number	\$2,213.00			
	Nonpriority Creditor's Name Attn: Officer Post Office Box 380901 Minneapolis, MN 55438	When was the debt incurred? 2014				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Repossession Deficiency				
4.3	Amcol Systems, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$508.00			
	111 Lancewood Road Columbia, SC 29210	When was the debt incurred?				
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Collection Account				
4.4	Avant Credit Corporation	Last 4 digits of account number	\$5,000.00			
	Nonpriority Creditor's Name 640 North La Salle Drive Suite 535	When was the debt incurred?				
	Chicago, IL 60654  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Installment Loan				

Debtor 1 Chaunston O'Brien Jordan		Case number (if know)			
4.5	Capital One	Last 4 digits of account number	\$3,500.00		
	Nonpriority Creditor's Name Post Office Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	ψο,οσο.σο		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify			
4.6	Chase	Last 4 digits of account number	\$2,801.00		
	Nonpriority Creditor's Name Post Office Box 15298 Wilmington, DE 19850-5298	When was the debt incurred? 2015			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Credit Card Purchases			
4.7	Credit Repair, Inc.	Last 4 digits of account number	\$0.00		
	Nonpriority Creditor's Name Post Office Box 3928	When was the debt incurred?			
	Salt Lake City, UT 84110  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Possible Obligation			

Debtor 1 Chaunston O'Brien Jordan		Case number (if know)			
4.8	Fort Sill National Bank	Last 4 digits of account number	\$30.00		
1.0	Nonpriority Creditor's Name		Ψ30.00		
	Post Office Box 31279	When was the debt incurred?			
	Tampa, FL 33631-3279				
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Bank Fees			
4.9	Frost-Arnett Company	Last 4 digits of account number	\$687.00		
	Nonpriority Creditor's Name				
	Post Office Box 198988	When was the debt incurred?			
	Nashville, TN 37219-8988  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	The of the date you me, the stand of the or an that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only				
	_	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans			
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	Other. Specify Collection Account			
	□ TeS	Other. Specify Confection Account			
4.1	Nationwide Insurance Company	Last 4 digits of account number	\$133.00		
	Nonpriority Creditor's Name	- <u> </u>			
	One Nationwide Plaza	When was the debt incurred?			
	Columbus, OH 43215-2220  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that appro			
	Debtor 1 only	Політ			
	<u> </u>	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Insurance Deficiency			

Deb	or 1 Chaunston O'Brien Jordan	Case number (if know)				
4.1 1	Regional Acceptance	Last 4 digits of account number	\$9,038.00			
	Nonpriority Creditor's Name 1200 E. Fire Tower Road	When was the debt incurred? 2013				
	Greenville, NC 27858  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	■ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other Specify Repossession Deficiency				
4.1	State Employees' Credit Union		Unknown			
2	Nonpriority Creditor's Name	Last 4 digits of account number	Olikilowii			
	Attn: Officer Post Office Box 25279	When was the debt incurred?				
	Raleigh, NC 27611  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	<u> </u>					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other Specify Bank Fees				
4.1	Synchrony Bank (Bankruptcy					
3	Notice)	Last 4 digits of account number	\$7,315.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Department Post Office Box 965061	When was the debt incurred? 2015				
	Orlando, FL 32896-5061  Number Street City State Zlp Code	As of the date you file the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Credit Card Purchases  Other. Specify (Care Credit)				

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Debtor 1 Chaunston O'Brien Jordan		Case number (if know)				
4.1	Verizon Wireless Bankruptcy Admin.	Last 4 digits of account numb	er	\$200.00		
	Nonpriority Creditor's Name 500 Technology Drive, Suite 550 Weldon Spring, MO 63304	When was the debt incurred?		-		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsect	ured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a s	eparation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No		aring plans, and other similar debts			
	Yes	Other. Specify Collection	n Account	-		
4.1	WakeMed	Last 4 digits of account numb	or	\$200.00		
J	Nonpriority Creditor's Name	Last 4 digits of account numb				
	Bankruptcy Dept. Post Office Box 29516 Raleigh, NC 27626	When was the debt incurred?		-		
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sh	aring plans, and other similar debts			
	Yes	Other. Specify Medical	Bills	-		
is tryir have n	is page only if you have others to be notified ag to collect from you for a debt you owe to s	about your bankruptcy, for a debt th omeone else, list the original credito at you listed in Parts 1 or 2, list the a	at you already listed in Parts 1 or 2. For examp r in Parts 1 or 2, then list the collection agency dditional creditors here. If you do not have add	y here. Similarly, if you		
	nd Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
CACH		Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claim	ims		
	x 5980 r, CO 80217-5980		Part 2: Creditors with Nonpriority Unsecured	Claims		
Delive		Last 4 digits of account number				
-	nd Address	On which entry in Part 1 or Part 2 did	<u> </u>			
Cavalr	y ımmit Lake Drive	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Clai			
	la, NY 10595		Part 2: Creditors with Nonpriority Unsecured	Claims		
	•	Last 4 digits of account number				
	nd Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
	ill National Bank Office Box 30495	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Clai			
	n, FL 33630-0495		Part 2: Creditors with Nonpriority Unsecured	Claims		
		Last 4 digits of account number				
	nd Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
	Med Health and Hospitals	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ims		
Post C	Office Box 29516		Part 2: Creditors with Nonpriority Unsecured	Claims		

Official Form 106 E/F

Debtor 1 Chaunston O'Brien Jordan

Case number (if know)

Raleigh, NC 27626

Last 4 digits of account number

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	5,285.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,285.00
				7	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,625.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	31,625.00

Fill in this inform	Fill in this information to identify your case:						
Debtor 1	Chaunston O'Brid	en Jordan					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NORTH CAROLINA (NC				
Case number _ (if known)				☐ Check if this is an amended filing			

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				<del>_</del>
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	Number	Sireei			
	City		State	ZIP Code	_
2.3	City		State	ZIP Code	
2.3					_
	Name				
	Number	Street			<u> </u>
		0001			
	City		State	ZIP Code	<del>_</del>
2.4	J.,		- Claid		
2.7	Name				_
	ivame				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.5					
	Name				
					_
	Number	Street			
					_
	City		State	ZIP Code	

## Case 18-00539-5-DMW Doc 1 Filed 02/05/18 Entered 02/05/18 14:01:53 Page 35 of 54

Fill in th	is information to identify your	case:		
Debtor 1	Chaunston O'Bri	en Jordan		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, t		Middle Name	Last Name	
United S	tates Bankruptcy Court for the:	EASTERN DISTRICT C EXEMPTIONS)	F NORTH CAROLINA (NO	
Case nui (if known)	mber			☐ Check if this is an amended filing
	al Form 106H			
Sche	dule H: Your Cod	lebtors		12/15
people ar ill it out, our nam	e filing together, both are equ	ally responsible for supper boxes on the left. Attach ). Answer every question	olying correct information the Additional Page to t	complete and accurate as possible. If two married n. If more space is needed, copy the Additional Page, his page. On the top of any Additional Pages, write a codebtor.
п.,	,	,	·	
□ No ■ Ye				
	ithin the last 8 years, have yo ona, California, Idaho, Louisiana			(Community property states and territories include ton, and Wisconsin.)
_	o. Go to line 3. es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?	
in lir Forn	ne 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make su	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official S). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Alfonzo Alston Jr. 12 Wilders Drive Franklinton, NC 27525			☐ Schedule D, line ■ Schedule E/F, line4.11 ☐ Schedule G Regional Acceptance
3.2	Joe Jordan 455 Loblolly Circle Louisburg, NC 27549			☐ Schedule D, line  ■ Schedule E/F, line ☐ Schedule G Ally Financial

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Fill	in this information to identify your o	ase:								
	btor 1 Chaunston O'Brien Jordan									
	otor 2  puse, if filing)				_					
United States Bankruptcy Court for the: EASTERN DISTRICT (EXEMPTIONS)			OF NORTH CAROL							
Case number (If known)			-		Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:					
0	fficial Form 106I		MM / DD/ YYYY							
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.  The describe Employment fill in your employment	ur spouse is not filing wi On the top of any additi	ith you, do not inclu	ude infori	nati	on about	your spo	ouse. If m	ore space is	needed,
1.	information.		Debtor 1			Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employed —			
	information about additional	, ,	☐ Not employed		☐ Not employed					
	employers.	Occupation	Tech III Csr							
	Include part-time, seasonal, or self-employed work.									
	Occupation may include student or homemaker, if it applies.	Employer's address	Rt-10 Green Hil Reading, PA 19							
		How long employed t	here? 9 1/2 Y	ears						
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to	report for	any	line, write	\$0 in the	space. In	clude your no	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	on for all e	mpl	oyers for th	nat perso	on on the I	ines below. If	you need
						For Debt	tor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$					3,2	267.07	\$	N/A	
3.	Estimate and list monthly overtime pay. 3.				+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ne 2 + line 3.		4.	\$	3,26	7.07	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Chaunston O'Brien Jordan	-	(	Case	number (if k	nown)				
						Debtor 1		non-	Debtor filing s	2 or spouse	
	Cop	by line 4 here	4.		\$_	3,267	7.07	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	730	5.03	\$		N/A	1
	5b.	Mandatory contributions for retirement plans	5b	٥.	\$_	(	0.00	\$		N/A	1
	5c.	Voluntary contributions for retirement plans	50	Э.	\$_		5.03	\$		N/A	
	5d.	Required repayments of retirement fund loans	50	d.	\$_	259	9.44	\$		N/A	_
	5e.	Insurance	56		\$_		3.31	\$		N/A	_
	5f.	Domestic support obligations	5f		\$_		0.00	\$		N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g	ე. 1.+	\$ \$		0.00	+ \$		N/A N/A	_
•			_		· —			· · ·			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	1,424		\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ _	1,842	2.26	\$		N/A	<u>\</u>
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	88	•	\$			\$		N/A	
	8b.	monthly net income.  Interest and dividends	8b		\$ -		0.00 0.00	\$ 		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			· —			·			_
	04	settlement, and property settlement.	80		\$ \$		0.00	\$		N/A	
	8d. 8e.	Unemployment compensation Social Security	8c 8e		\$ _		0.00 0.00	\$ 		N/A N/A	_
	8f.	Other government assistance that you regularly receive	00	٥.	Ψ_	<u> </u>	J.00	Ψ		11/7	<u>1</u>
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f	:	\$		0.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g		\$_		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	า.+	\$_		0.00	+ \$		N/A	<u> </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		<u> </u>		0.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4 040 00	+ \$		NI/A	_ c	4 0 40 00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		1,842.26	+ \$		N/A	= \$_	1,842.26
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	dep			•		·		e <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	1,842.26
13.	Do	you expect an increase or decrease within the year after you file this form	?						'	Combi month	ned ly income
		No.									

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	Chaunston C	)'Brien J	ordan		Chec	k if this is:	
Deh	tor 2					_	An amended filing	wing postpetition chapter
	ouse, if filing)							the following date:
Unit	ed States Bank	cruptcy Court for the:		RN DISTRICT OF NORTH (EMPTIONS)	CAROLINA	-	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	orm 106J						
		J: Your I						12/
info	ormation. If not	nore space is ne vn). Answer ever ribe Your House	eded, atta y questio	. If two married people ar ach another sheet to this n.				
1.	Is this a joi							
	■ No. Go t	o line 2. es Debtor 2 live i	n a sonar	ate household?				
		No	•	ial Form 106J-2, <i>Expenses</i>	for Separate Housel	hold of Debi	or 2.	
2.	Do you hay	ve dependents?	■ No					
	•	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes
3.	expenses of	penses include of people other th ad your depende	nan <sub>—</sub>	No Yes				☐ Yes
exp	imate your e	a date after the b	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance and		government assistance in Cluded it on <i>Schedule I: Y</i>			Your exp	enses
4.		or home owners		nses for your residence. In or lot.	nclude first mortgage	4. \$		400.00
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	4b. Prope	erty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		0.00
		eowner's associat		dominium dues <b>our residence,</b> such as ho		4d. \$ 5. \$		0.00

Medical and dental expenses   11. \$   0.00	6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Cell Phone Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Personal Property Taxes Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 11c. Other. Specify: 11d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments on alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments on alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments of alimony, maintenance	number (	(if known)
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Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services 10. \$ 34.00 Personal care products and services 11. \$ 0.00 Personal care products and services 11. \$ 0.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 233.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Transportation. Include gas, maintenance, bus or train fare. Do not include insurance deducted from your pay or included in lines 4 or 20. 15s. Lile insurance 15s. \$ 0.00 15s. Lehelit insurance 15s. \$ 0.00 15s. Vehicle insurance 15s. \$ 0.00 15s. Vehicle insurance. 15s. \$ 0.00 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other, Specify: 17c. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other, Specify: 17d. \$ 0.00 17d. Other, Specify: 17d. \$ 0.00 17d. Other, Specify: 17d. Specify: 17d. \$ 0.00 17d. Other, Specify: 17d. Specify: 17d. \$ 0.00 17d. Other specify: 17d. Specif	Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Personal Property Taxes Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 19 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify: Emergencies /Miscellaneous  Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 24 and 22b. The result is your monthly expenses.  Calculate your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses within the year after you file	•	
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23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .  23c. \$ 206.00  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage?	23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .  2  2  2  2  2  2  2  2  2  2		
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The result is your monthly net income.  23c. \$ 206.00  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage?	The result is your <i>monthly net income</i> . 2  Do you expect an increase or decrease in your expenses within the year after you file		
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because or modification to the terms of your mortgage?		23c. \$	206.00
■ No.  ☐ Yes. Explain here:			

Fill	in this inforr	nation to identify your					
Deb	tor 1	Chaunston O'Brie					
Deb	tor 2	First Name	Middle Name	Last Name			
	ise if, filing)	First Name	Middle Name	Last Name			
Uni	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT ( EXEMPTIONS)	OF NORTH CAROLINA (NC	:		
Cas (if kn	e number					_	if this is an ded filing
Su	mmary c			nd Certain Statist			12/15
			ole. If two married people	, ara filina tagathar, bath :		or sunnlvin	g correct
			es first; then complete th	he information on this for the box at the top of this	m. If you are filing amend		les after you file
	original for		es first; then complete th	he information on this for	m. If you are filing amend		es after you file
/oui	original for	ms, you must fill out a	es first; then complete th	he information on this for	m. If you are filing amend	ed schedu	
/oui	1: Summ Schedule A	ms, you must fill out a arize Your Assets	es first; then complete the new Summary and chec	he information on this for	m. If you are filing amend s page.	ed schedu	ssets f what you own
/oui	1: Summ Schedule A 1a. Copy lin	ms, you must fill out a arize Your Assets  VB: Property (Official For e 55, Total real estate, for e 55 are	es first; then complete the new Summary and checonem 106A/B) rom Schedule A/B	ne information on this for k the box at the top of this	m. If you are filing amends	ed schedu	ssets
Par	Schedule A 1a. Copy lin 1b. Copy lin	ms, you must fill out a arize Your Assets  VB: Property (Official Form 55, Total real estate, form 62, Total personal pro	es first; then complete the new Summary and checonomy and checonomy and checonomy and checonomy and checonomy and checonomy are summary and checonomy and checonomy are summary and checonomy are summar	ne information on this for k the box at the top of this	m. If you are filing amends	ed schedu	ssets f what you own 0.00 6,045.00
Par	Schedule A 1a. Copy lin 1b. Copy lin 1c. Copy lin	ms, you must fill out a arize Your Assets  VB: Property (Official Form 55, Total real estate, form 62, Total personal pro	es first; then complete the new Summary and checonomy and checonomy and checonomy and checonomy and checonomy and checonomy are summary and checonomy and checonomy are summary and checonomy are summar	ne information on this for k the box at the top of this	m. If you are filing amends	Your as Value of \$	ssets f what you own 0.00 6,045.00
Par 1.	Schedule A 1a. Copy lin 1b. Copy lin 1c. Copy lin	ws, you must fill out a arize Your Assets  WB: Property (Official For e 55, Total real estate, for e 62, Total personal proef e 63, Total of all property	es first; then complete the new Summary and checonomy and checonomy and checonomy and checonomy and checonomy and checonomy are summary and checonomy and checonomy are summary and checonomy are summar	ne information on this for k the box at the top of this	m. If you are filing amends	Your as Value of \$\$	ssets f what you own 0.00 6,045.00
Par 1.	Schedule A 1a. Copy lin 1b. Copy lin 1c. Copy lin 2: Summ	ms, you must fill out a arize Your Assets  VB: Property (Official For e 55, Total real estate, for e 62, Total personal proe 63, Total of all property arize Your Liabilities  : Creditors Who Have Co	es first; then complete the new Summary and checonem 106A/B) from Schedule A/B	ne information on this form	m. If you are filing amends page.	Your as Value of \$\$	5sets f what you own  0.00  6,045.00  6,045.00
Par 1.	Schedule A 1a. Copy lin 1b. Copy lin 1c. Copy lin 2: Summ Schedule D 2a. Copy the	MS, you must fill out a arize Your Assets  WB: Property (Official Form 55, Total real estate, form 62, Total personal property 63, Total of all property arize Your Liabilities  Creditors Who Have Come total you listed in Column F: Creditors Who Have	es first; then complete the new Summary and checome Summary and ch	ne information on this form k the box at the top of this k the box at the top of this his box at the top of this contact the box at the top of this k the box at the top of this box at the top of the box at the top of the box at the top of the box at the top of this box at the top of the box at the bo	m. If you are filling amends page.	Your as Value of \$ \$ \$ Your lia Amount	6,045.00 6,045.00 6,045.00 6,045.00 4,810.00
Par 1.	Schedule A 1a. Copy lin 1b. Copy lin 1c. Copy lin 2: Summ  Schedule D 2a. Copy the Schedule E 3a. Copy the	ms, you must fill out a arize Your Assets  WB: Property (Official For e 55, Total real estate, for e 62, Total personal professor e 63, Total of all property arize Your Liabilities  Creditors Who Have Core total you listed in Column/F: Creditors Who Have the total claims from Part	es first; then complete the new Summary and checome Summary and checome Summary and checome 106A/B)  rom 106A/B)  rom Schedule A/B	ne information on this form k the box at the top of this k the box at the top of this view of the box at the top of this view of the last page at Form 106E/F)	m. If you are filling amends page.  s page.  of Part 1 of Schedule D	Your as Value of \$\$  Your lia Amount	6,045.00 6,045.00 abilities

Schedule I: Your Income (Official Form 106I) 1,842.26 Copy your combined monthly income from line 12 of Schedule I.....

Schedule J: Your Expenses (Official Form 106J) 1,636.26 Copy your monthly expenses from line 22c of Schedule J.....

#### Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
  - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
  - Yes
- What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

### Case 18-00539-5-DMW Doc 1 Filed 02/05/18 Entered 02/05/18 14:01:53 Page 41 of 54

Debtor 1 Chaunston O'Brien Jordan

Case number (if known)

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,267.07

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this infor	mation to identify your	case:			
Debtor 1	Chaunston O'Brie				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C EXEMPTIONS)	F NORTH CAROLINA	4 (NC	
Case number (if known)					☐ Check if this is an amended filing
Official Ford		ın Individual	Debtor's \$	Schedules	12/15
If two married p	eople are filing togethe	r, both are equally respo	nsible for supplying	correct information.	
obtaining mone		n connection with a banl			tement, concealing property, or 00, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill o	out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules	filed with this declarati	ion and
X /s/ Ch	aunston O'Brien Jord	lan	X		
Chaur	nston O'Brien Jordan ure of Debtor 1			e of Debtor 2	
Date	February 5, 2018		Date		

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)

			Ľa	stern Distric	t of North Carollia (NC	Exempuo	115)		
In re	e Chaunstor	O'Brie	n Jordan		Dobtow(s)		ase No.	49	
					Debtor(s)	C.	hapter	13	
	Ι	DISCL	OSURE (	OF COMPE	NSATION OF ATTO	RNEY FO	OR DE	CBTOR(S)	
1.	compensation pa	id to me	within one ye	ear before the fili	6(b), I certify that I am the atto ng of the petition in bankruptc of or in connection with the ba	y, or agreed to	be paid	to me, for services rendered of	or to
	For legal se	rvices, I	have agreed t	o accept		\$		4,950.00	
	Prior to the	filing of	this statemen	t I have received		\$_		0.00	
	Balance Du	e				\$_		4,950.00	
2.	\$ <u>310.00</u> of	the filin	g fee has bee	n paid.					
3.	The source of the	comper	sation paid to	me was:					
	Debtor		Other (spec	eify):					
4.	The source of co	mpensat	on to be paid	to me is:					
	Debtor		Other (spec	eify):					
5.	■ I have not ag	reed to s	hare the abov	re-disclosed com	pensation with any other perso	n unless they a	are meml	pers and associates of my law	/ firm.
					sation with a person or persons ames of the people sharing in th				. A
6.	In return for the	above-di	sclosed fee, I	have agreed to r	ender legal service for all aspe	cts of the bank	cruptcy c	ase, including:	
	<ul><li>b. Preparation a</li><li>c. Representation</li><li>d. [Other provises</li><li>Exempt</li></ul>	nd filing on of the ions as r otion pla uired by	of any petition debtor at the eeded]	on, schedules, sta meeting of credit ans Test plann	ering advice to the debtor in determent of affairs and plan white tors and confirmation hearing, ing, and other items if specule. May include fee paid	ch may be requand any adjour	aired; rned hear l <b>uded ir</b>	rings thereof;	ract
7.	Repres	sentatio	n of the de	btors in any di	ee does not include the following schargeability actions, related in attorney/client fee c	ief from stay			
	each, . Class	Judgme Certific ment C	ent Search: ation: Usua	\$10 each, Cred lly \$15 per clie	nclude such things as: Pa dit Counseling Certificatio ent, Use of computers for ( paralegal typing assistand	n: Usually \$ Credit Coun	15 per o seling b	client, Financial Managen priefing or Financial	nent
					CERTIFICATION				
this	I certify that the bankruptcy proce		g is a complet	te statement of ar	ny agreement or arrangement fo	or payment to	me for re	epresentation of the debtor(s)	in
F	February 5, 20	18			/s/ Jason Watso	n for LOJTO			
	Date				Jason Watson f		2986		
					Signature of Attorn The Law Offices		Orcus	DC .	
					6616-203 Six Fo		orcutt,	FU	
					Raleigh, NC 276				
					Name of law firm				
1									

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter '	<b>7</b> :	Liquidation
\$	245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
\$	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:						
Debtor 1	Chaunston O'Brien Jordan					
Debtor 2 (Spouse, if filing)						
United States B	Sankruptcy Court for the:	Eastern District of North Carolina (NC Exemptions)				
Case number						

Check as directed in lines 17 and 21:					
According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
☐ 4. The commitment period is 5 years.					
☐ Check if this is an amended filing					

### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	——	,.						
Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.								
					Colur Debte		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissio	ons (before all	\$	3,267.07	\$	
3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	e paymer	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly polynous or your dependents, including child support from an unmarried partner, members of your househout and roommates. Do not include payments from a spouyou listed on line 3.	rt. Include old, your d	e regular lepende	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here ->	•\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	•\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

7. Interest, dividends, and royalties  8. Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you  For your spouse  9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.	
8. Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you  For your spouse  9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you \$ 0.00  For your spouse \$ \$  9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. \$ \$  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the	
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9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the	
benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount.  Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the	
Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the	
10101 001011	
\$\$	
\$\$\$	
Total amounts from separate pages, if any. + \$ \$	
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  \$ 3,267.07 + \$ = \$	67.07
Total ave monthly	
Part 2: Determine How to Measure Your Deductions from Income	
12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:	67.07
You are not married. Fill in 0 below.	
☐ You are married and your spouse is filing with you. Fill in 0 below.	
You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or you dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.	r
Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additiona	
adjustments on a separate page.	
If this adjustment does not apply, enter 0 below.	
Total\$Copy here=>	0.00
14. Your current monthly income. Subtract line 13 from line 12.	67.07
15. Calculate your current monthly income for the year. Follow these steps:	
15a. Copy line 14 here=> \$	67.07
15a. Copy line 14 here=>	
Multiply line 15a by 12 (the number of months in a year).	

**Chaunston O'Brien Jordan** 

Debtor 1

Debt	or 1	Cha	unston O'Brien Jordan		Case number (if known)			
16	. Calc	culate	e the median family income that applies to	you. Follow these s	teps:			
	16a.	. Fill i	n the state in which you live.	NC	_			
	16b.	. Fill i	n the number of people in your household.	1				
	16c.	. Fill i	n the median family income for your state and	size of household.	-	\$	45,469.00	
		To fi	nd a list of applicable median income amount uctions for this form. This list may also be ava	s, go online using th	e link specified in the separate	Ψ_		
17	. How	v do 1	he lines compare?					
	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposal 11 U.S.C.</i> § 1325(b)(3). <b>Go to Part 3.</b> Do NOT fill out <i>Calculation of Your Disposable Income</i> (Of							
	17b.	. [	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your Dis				
Par	t 3:	Ca	Ilculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4	)			
18.	Сор	у уо	ur total average monthly income from line 1	11.		\$	3,267.07	
19.	cont	tend t	he marital adjustment if it applies. If you are hat calculating the commitment period under 1 income, copy the amount from line 13.	married, your spou	se is not filing with you, and you			
	19a. If the marital adjustment does not apply, fill in 0 on line 19a.				<b>-</b> \$	0.00		
	19b.	. Sub	tract line 19a from line 18.			\$_	3,267.07	
20.	Calc	culate	e your current monthly income for the year.	. Follow these steps	3:			
	20a.	. Сор	y line 19b			\$_	3,267.07	
		Mult	iply by 12 (the number of months in a year).				<b>x</b> 12	
	20b.	. The	result is your current monthly income for the y	ear for this part of the	ne form	\$_	39,204.84	
	20c.	Сор	y the median family income for your state and	size of household for	rom line 16c	\$_	45,469.00	
	21.	How	do the lines compare?					
		•	Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by the c	ourt, on the top of page 1 of this form, ch	eck box 3,	The commitment	
			Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise orde	ered by the court, on the top of page 1 of	this form, o	check box 4, The	

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Debtor 1	Chaunston O'Brien Jordan	Case number (if known)
Part 4:	Sign Below	
By s	signing here, under penalty of perjury I declare that the information	on this statement and in any attachments is true and correct.
X /s/	Chaunston O'Brien Jordan	
Cr	naunston O'Brien Jordan	
Sig	gnature of Debtor 1	
Date	February 5, 2018	
	MM / DD / YYYY	

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Employment Security Commission Ally Financial Fort Sill National Bank Attn: Benefit Payment Control Attn: Officer Post Office Box 30495 Post Office Box 26504 Post Office Box 380901 Tampa, FL 33630-0495 Raleigh, NC 27611-6504 Minneapolis, MN 55438 NC Child Support Amcol Systems, Inc. Frost-Arnett Company Centralized Collections 111 Lancewood Road Post Office Box 198988 Post Office Box 900006 Columbia, SC 29210 Nashville, TN 37219-8988 Raleigh, NC 27675-9006 Equifax Information Systems LLC Avant Credit Corporation Joe Jordan P.O. Box 740241 640 North La Salle Drive 455 Loblolly Circle Louisburg, NC 27549 Atlanta, GA 30374-0241 Suite 535 Chicago, IL 60654 Experian CACH, LLC Law Office of John T Orcutt P.O. Box 2002 PO Box 5980 6616 Six Forks Road Allen, TX 75013-2002 Denver, CO 80217-5980 Suite 203 Raleigh, NC 27615 Trans Union Corporation Capital One Nationwide Insurance Company P.O. Box 2000 Post Office Box 30285 One Nationwide Plaza Crum Lynne, PA 19022-2000 Salt Lake City, UT 84130-0285 Columbus, OH 43215-2220 Internal Revenue Service (ED)\*\* Regional Acceptance Cavalry Post Office Box 7346 500 Summit Lake Drive 1200 E. Fire Tower Road Philadelphia, PA 19101-7346 Valhalla, NY 10595 Greenville, NC 27858 US Attorney's Office (ED)\*\* Chase State Employees' Credit Union 310 New Bern Avenue Attn: Officer Post Office Box 15298 Suite 800, Federal Building Wilmington, DE 19850-5298 Post Office Box 25279 Raleigh, NC 27601-1461 Raleigh, NC 27611 North Carolina Dept. of Revenue\*\* Credit Repair, Inc. Synchrony Bank (Bankruptcy Notic Attn: Bankruptcy Department Post Office Box 1168 Post Office Box 3928 Post Office Box 965061 Raleigh, NC 27602-1168 Salt Lake City, UT 84110 Orlando, FL 32896-5061

Fort Sill National Bank

Post Office Box 31279 Tampa, FL 33631-3279 Verizon Wireless Bankruptcy Admin 500 Technology Drive, Suite 550

Weldon Spring, MO 63304

Alfonzo Alston Jr.

Franklinton, NC 27525

12 Wilders Drive

WakeMed Bankruptcy Dept. Post Office Box 29516 Raleigh, NC 27626

WakeMed Health and Hospitals Post Office Box 29516 Raleigh, NC 27626

## **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

Eastern District of Portin Caronna (NC Exemptions)						
In re	Chaunston O'Brien Jordan		Case No.			
		Debtor(s)	Chapter	13		
	VFR	RIFICATION OF CREDITOR MA	TRIX			
	V EX	diffication of execution was	11111/1			
The ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and correct	ct to the best	of his/her knowledge.		
Date:	February 5, 2018	/s/ Chaunston O'Brien Jordan				

Chaunston O'Brien Jordan

Signature of Debtor